## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10 579 605 APPLICANT(S)

FILING DATE

**CLAIMS** 

|                 | AS FILED   |             |   | AFTER 1*AMENDMENT                                |             | TER<br>ndment |  |  |  |
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| TOTAL<br>CLAIMS | ***************************************          |             | 15  |  |             |               |  |  |  |
|                 | PTO - 1360 (REV. 11/04)                          |             |   |  |             |               |  |  |  |

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| TOTAL<br>IND.   |  | +  |               | +                   |             | •                  |  |
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| TOTAL<br>CLAIMS |  | , S  |               |                     |             |                    |  |
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